

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ORTHOPEDIC AND DENTAL CERAMIC IMPLANTS

the specification of which (I authorize Choate, Hall & Stewart to check one of the following, three choices, and fill in the blanks, if applicable):

_____ is attached hereto

 X was filed on October 16, 1996 as Application
Serial No. 08/729,343 and amended on _____
(if applicable).

_____ was filed as PCT international application No. _____,
on _____ and was amended under PCT Article 19
on _____ (if applicable).

I hereby state that I have reviewed and understood the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledged the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s):

Priority Claimed

(Number)	(Country)	(Day/Month/Year/Filed)	Yes	No
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Full name of first inventor: Dosuk D. Lee

Inventor's signature: [Signature] Date:

Residence: 50 Longwood Avenue, Apt. 518, Brookline, Massachusetts 02146

Citizenship: United States

Post Office Address: same

Full name second inventor: Christian Rey

Inventor's signature: _____ Date: _____

Residence: Lieu-dit "Les Dames" Aureville 31320 Castanet, France

Citizenship: France

Post Office Address: same

Full name third inventor: Maria Aiolova

Inventor's signature: M. M. Love Date: 10/15/98

Residence: 123 Seawall Avenue, Brookline, Massachusetts 02146

Citizenship: Bulgaria ^{N.A.} United States

Post Office Address: same

Full name fourth inventor: Aliassghar Tofighi

Inventor's signature: *[Signature]* Date: 10-19-1998

Residence: 204 Waverly Street, Belmont, MA 02178

Citizenship: France

Post Office Address: same



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Prior Foreign Application(s):

Priority Claimed

(Number)	(Country)	(Day/Month/Year/Filed)	Yes	No
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(Number) (Country) (Day/Month/Year/Filed) Yes No

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

<u>08/650,764</u>	<u>May 20, 1996</u>	<u>pending</u>
(Application Serial No.)	(status)	
(filing date)		

<u>08/446,182</u>	<u>May 19, 1995</u>	<u>pending</u>
(Application Serial No.)	(filing date)	(status)

PCT Applications designating the United States:

_____	_____	_____
(PCT Appl. No.)	(filing date)	(status)

_____	_____	_____
(PCT Appl. No.)	(filing date)	(status)

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:
Sam Pasternack, Reg. No. 29,576; David J. Powsner, Reg. No. 31,868;
Mary Rose Scozzafava, Reg. No. 36,268; Mary Raynor Jimenez, Reg. No. 37,219; and
Brenda Herschbach Jarrell, Reg. No. 39,223.

Address all telephone calls to Mary Rose Scozzafava at telephone no. (617) 248-5000.

Address all correspondence to Mary Rose Scozzafava, Choate, Hall & Stewart, Exchange Place, 53 State Street, Boston, Massachusetts 02109-2891.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United State Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.

Full name of first inventor: Dosuk D. Lee

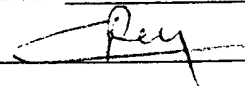
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Inventor's signature: _____ Date: _____

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Citizenship: Bulgaria

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